

Work Order ID 102027

May-22-13 1:32:10 PM

102027

Page 1

Item ID: D4387-043

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Harness Assembly

Start Date: 5/22/13 Start Qty: 8.00

8

Cust Item ID:

Required Date: 6/05/13 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals: Process Plan: MCS Date: 13-05-22 Tooling:

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4387	D								

100 PURCHASING 0.00

100

Purchasing

PURCHASING

Memo

0.00

Purchasing

Issue P/O: 19954

P/N: 4173-2-031-2396

Possible supplier: Amsafe

Certificate of conformaty is required

13-05-22

110

Receive & Inspect for Damage & Mat'l Certs 0.00

110

Packaging

Memo

0.00

Packaging

Ensure certificate of conformity is attached

13/4/20 (8)

120

QC5- Inspect part completeness to step on W/O 0.00

120

QC

Memo

0.00

Quality Control

13 6 21

8

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misread
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Offset
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 102027

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102027

Page 2

Item ID: D4387-043

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Harness Assembly

Start Date: 5/22/13 Start Qty: 8.00

8

Cust Item ID:

Required Date: 6/05/13 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Identify as per dwg & Stock Location: <i>ST265</i>	0.00							
150									
Packaging	Memo	0.00				<i>82</i>			<i>80</i>
Packaging									<i>13-6-21</i>
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							<i>13/6/25</i>
Quality Control									

13-06-24

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

May-22-13 1:32:14 PM

Page 1
T

Work Order ID: 102027

102027

Parent Item: D4387-043

D4387-043

Parent Item Name: Harness Assembly

Start Date: 5/22/13

Required Date: 6/05/13

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP rev A 11.05.25 new issue EC verified by:DD
13.04.08 AS PER DWG REV.D DD VERF:JLM

IPP REV:B

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
4173-2-031-2396		Purchased	No				Each	0.0000		8			
4173-2-031-2396									**				
Harness Assembly													

Pa 13/6/20 (P)
102027

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

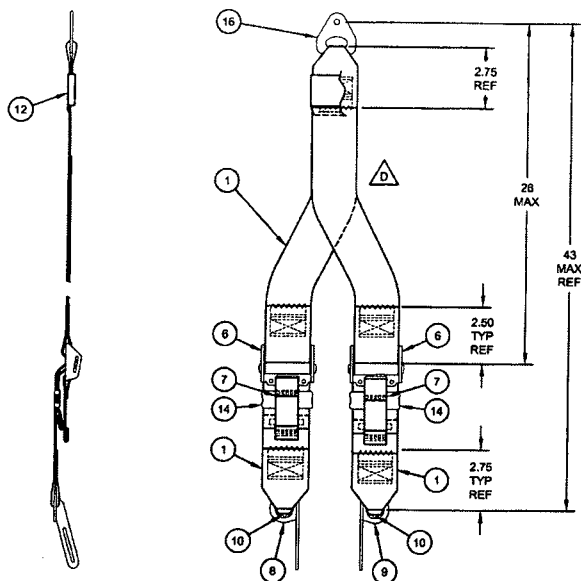
Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

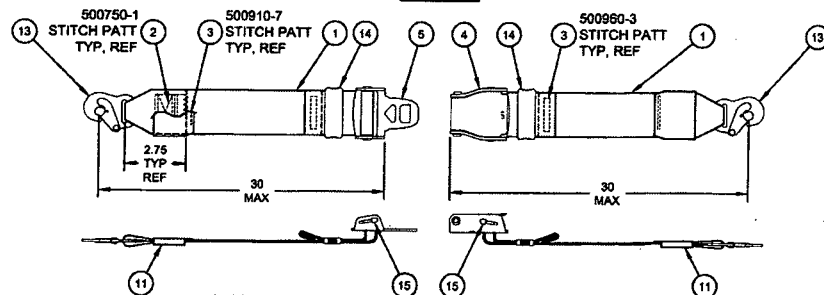
FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
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<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
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<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
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		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

SPECIFICATION CONTROL DRAWING



D4387-9



D4387-13

D4387-11

D4387-043 HARNESS ASSEMBLY

ITEM	QTY -043	QTY -9	QTY -11	QTY -13	DART P/N	DESCRIPTION	AMSAFE P/N OR MATERIAL P/N
	X				D4387-043	HARNESS ASSEMBLY	4173-2-031-2396
1		X			D4387-9	SHOULDER STRAP	4173-2110312396
1			X		D4387-11	BUCKLE HALF	4173-2070312396
1				X	D4387-13	CONNECTOR HALF	4173-2090312396
1		A/R	A/R	A/R		WEBBING, POLYESTER	T1200-5
2		A/R	A/R	A/R		THREAD	207
3		A/R	A/R	A/R		THREAD	69
4			1			BUCKLE ASSY	502750-401
5				1		CONNECTOR ASSY	504459-417-72
6		2				ADJUSTER ASSY	503050-409
7		2				PULL TAB	500976-425
8		1				ADAPTER, HARNESS	505122-2-72
9		1				ADAPTER, HARNESS	505122-1-72
10		2				INSERT	AFG0568293
11			1	1		LABEL	447664
12		1				LABEL	447664
13		2	1	1		HOOK ASSY	502737-441-72
14			1	1		WEB SLIDE	503964-1
15			2	2		PLUG	502913
16		1				END FITTING	501743-21-72

NOTES:

- 1) PURCHASE: D4387-043/-9/-11/-13 FROM AMSAFE INC., Phoenix, AZ.
- 2) FINISH: N/A
- 3) TOLERANCES: .XX ±0.25
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: USE PLASTIC ENGRAVED TAGS AND LABEL PER FAR 21.607 TO CONTAIN THE FOLLOWING AT MINIMUM:
MANUFACTURER P/N: 4173-2-031-2396
CUSTOMER P/N: D4387-043
RATED: 3000 LBS DATE OF MANUFACTURER
CONFORMS TO FAA TSO-C114
- 7) WEIGHT: 1.85 lb
- 8) INDICATED DIMS ARE FULLY EXTENDED LENGTHS

UNCONTROLLED COPY
EXCEPT FOR DOCUMENT
WORK ORDER

RELEASED
2013-04-02

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	SM	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. D
MFG. APPR.		DSC-D4387	SHEET 2 OF 2
APPROVED		TITLE	SCALE
DE APPR.		HARNESS ASSEMBLY	NTS
DATE	13.01.23	COPYRIGHT © 2011 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO19954

Purchase Order Date 5/22/2013

PO Print Date 6/4/2013

Page Number 1 of 1

Order From :

VU-AMS001

AMSAFE INC.
1043 NORTH 47TH AVENUE
PHOENIX, AZ 85043
US

Contact Name

Vendor Phone 602 850 2850

Vendor Fax 602-278-3479

Vendor Account Nbr

Buyer

Brigitte Golden

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

REVISED

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	3221-1-021-2396	Shoulder Harness	6/21/2013 Yes	8.00 Each		\$296.9600	\$2,375.68
		Special Inst:	AS PER DWG D4088 REV. A B101977				
2	3221-1-011-2396	Shoulder Harness	6/21/2013 Yes	12.00 Each		\$296.9600	\$3,563.52
		Special Inst:	AS PER DWG D4088 REV. A B101976				
3	4173-2-031-2396	Harness Assembly	6/21/2013 Yes	8.00 Each		\$256.6900	\$2,053.52
		Special Inst:	AS PER DWG D4387 REV. D B102027				
PO Total:							\$7,992.72

Change Nbr: 3

Change Date: 6/4/2013

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required YES NO

AmSafe

1043 NORTH 47th AVENUE
PHOENIX, AZ 85043
PH (602)850-2850 FAX (602)850-2812

SHIPPER/CERTIFICATION



CUSTOMER NO.	SALES ORDER NO.	BOL NO.	DATE PRINTED	PAGE NO.
10006113	S256023	000303712	06/18/13	1

DART AEROSPACE
1270 ABERDEEN STREET
HAWKESBURY
HAWKESBURY, ON K6A 1K7
Canada

DART AEROSPACE LTD.
1270 ABERDEEN ST
HAWKESBURY, ON K6A 1K7
Canada

Ship to ID: 10006125

CUSTOMER ORDER NO.	TERMS	FREIGHT	SHIP VIA	F.O.B.
PO19954	NET30	COLLECT	FedEx P1 10:30 AM	ORIGIN

Sales Order Remarks: 1517-9324-0
Remarks:

SHIPMENT REFERENCE 000303712

LINE	ITEM NUMBER / DESCRIPTION	DRAWING AND CERTIFICATIONS	DUE DATE	QTY ORDERED	QTY SHIPPED	QTY BACK ORDERED
2	Cust. Item No.: D4088-041 3221-1-011-2396 REST SYS ASSY W/IR	DRAWING: 3221 REV: A CERT: TSO-C114 Lot/Serial Numbers Shipped Quantity S256023-2	2013-06-18 12.0	12 Expire Ref.	12	0
1	Cust. Item No.: D4088-043 3221-1-021-2396 REST SYS ASSY W/IR	DRAWING: 3221 REV: A CERT: TSO-C114 Lot/Serial Numbers Shipped Quantity S256023-1	2013-06-18 8.0	8 Expire Ref.	8	0
3	4173-2-031-2396 REST SYS ASSY WO/IR	DRAWING: 4173 REV: F CERT: TSO-C114 Lot/Serial Numbers Shipped Quantity S256023-3	2013-06-18 8.0	8 Expire Ref.	8	0

I certify that the article(s) listed above conform to all applicable design data, and (as applicable):

FAA PMA, FMVSS 209, FMVSS 302, 14 CFR 25.853

FAA TSO C22f, C22g, C114 or TSO Plus

The conditions and tests required for TSO approval of the article(s) are minimum performance standards. It is the responsibility of those installing the article(s) either on or within a specific type or class of aircraft to determine that the aircraft installation conditions are within the standards applicable to the TSO article including (when applicable) the integrated non-TSO function. The non-TSO function is described as the seat belt airbag system including the inflator cable assembly and electrical components that have not been evaluated for functionality or installation requirements. TSO articles including the integrated non-TSO function must have separate approval for installation in an aircraft. The article(s) may be installed only if performed under 14 CFR part 43 or the applicable airworthiness requirements. Product shipped meets all material, processing and test requirements. Certifications/Test reports as applicable are retained on file at AmSafe Aviation.

AmSafe Authorized Signature: X

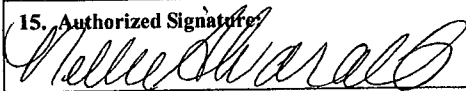
Nicole Davis

Printed Name:

Nicole Davis

JUN 18 2013

COUNTRY OF ORIGIN USA

1. Approving National Aviation Authority/Country: FAA/United States		2. AUTHORIZED RELEASE CERTIFICATE FAA Form 8130-3, AIRWORTHINESS APPROVAL TAG				3. Form Tracking Number: S256023-3NA	
4. Organization Name and Address: AMSAFE, INC 1043 NORTH 47 TH AVE PHOENIX, AZ. 85043		Cert. No. PT1967NM				5. Work Order/Contract/Invoice Number: S256023-3 0 PAGES ATTACHED	
6. Item:	7. Description:	8. Part Number:	9. Eligibility: *	10. Quantity:	11. Serial/Batch Number:	12. Status/Work:	
1	REST SYS ASSY	4173-2-031-2396	N/A	8	A0613	NEW	
13. Remarks: DRAWING: 4173 REV: F TSO:C114							
EXPORT AIRWORTHINESS APPROVAL: THIS ARTICLE MEETS THE SPECIAL REQUIREMENTS OF CANADA							
14. Certifies the items identified above were manufactured in conformity to: <input checked="" type="checkbox"/> Approved design data and are in a condition for safe operation. <input type="checkbox"/> Non-approved design data specified in Block 13.				19. <input type="checkbox"/> 14 CFR 43.9 Return to Service <input type="checkbox"/> Other regulation specified in Block 13 Certifies that unless otherwise specified in Block 13, the work identified in Block 12 and described in Block 13 was accomplished in accordance with Title 14, Code of Federal Regulations, part 43 and in respect to that work, the items are approved for return to service.			
15. Authorized Signature: 		16. Approval/Authorization No.: ODA 602112NM		20. Authorized Signature:		21. Approval/Certificate No.:	
17. Name (Typed or Printed): NELLIE ALVARADO		18. Date (m/d/y): JUN/17/2013		22. Name (Typed or Printed):		23. Date (m/d/y):	
User/Installer Responsibilities							
<p>It is important to understand that the existence of this document alone does not automatically constitute authority to install the part/component/assembly.</p> <p>Where the user/installer performs work in accordance with the national regulations of an airworthiness authority different than the airworthiness authority of the country specified in Block 1, it is essential that the user/installer ensures that his/her airworthiness authority accepts parts/components/assemblies from the airworthiness authority of the country specified in Block 1.</p> <p>Statements in Blocks 14 and 19 do not constitute installation certification. In all cases, aircraft maintenance records must contain an installation certification issued in accordance with the national regulations by the user/installer before the aircraft may be flown.</p>							